

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W. H. H. H.</i>		07-30-01
O.I.P.E. CLASSIFIER	<i>Dr</i>	32	8/7/01
FORMALITY REVIEW	<i>SL</i>	1021	09/05/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected N  
☐ Allowed I  
☐ (Through numeral) Canceled A  
☐ Restricted O

☐ Non-elected  
☐ Interference  
☐ Appeal  
☐ Objected

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If more than 150 claims or 10 actions  
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